

CANTERBURY ZONING BOARD OF ADJUSTMENT  
CANTERBURY, NEW HAMPSHIRE

**APPLICATION FOR A SPECIAL EXCEPTION**

For ZBA use:

Received: \_\_\_\_\_

Fees Paid: \_\_\_\_\_

Accepted: \_\_\_\_\_

Case No.: \_\_\_\_\_

Owner Name and Address:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone No.: \_\_\_\_\_

Map & Lot No.: \_\_\_\_\_

Location of Site: \_\_\_\_\_

Total Acreage: \_\_\_\_\_

Applicant's Name and Address if different from owner:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Zoning District (AC, C, CH, I, N, RE or RU): \_\_\_\_\_

A Special Exception is requested to allow: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

This Special Exception is requested from Article \_\_\_\_\_ Section \_\_\_\_\_ of  
the Canterbury Zoning Ordinance.

\*Name & Address of All Abutting property owners: Use Separate Abutters List Sheet\*

Page 2 Application for Special Exception

It is the responsibility of the applicant to supply the following information, as applicable, to allow the Zoning Board of Adjustment to make findings on each of the points below relative to a request for a Special Exception. (See Section 8.2) Attach additional pages as necessary.

1. That granting the permit would be in the public interest: \_\_\_\_\_

---

---

---

2. Describe how the proposed use would not adversely affect the property values in the district: \_\_\_\_\_

---

---

---

3. That the site specific site is an appropriate location for the proposed use: \_\_\_\_\_

---

---

---

---

4. That the proposed use would not adversely affect the health and safety of the residents and others in the area and would not be detrimental to the use or development of adjacent or neighboring properties: \_\_\_\_\_

---

---

---

5. That the proposed use would not constitute a nuisance because of offensive noise, vibration, smoke, dust, odors, heat, glare, or unsightliness:

---

---

---

---

6. That granting of the permit would be in the spirit of the ordinance. \_\_\_\_\_

---

---

---

7. That the proposed use would not constitute a hazard because of traffic, hazardous materials, or other conditions. \_\_\_\_\_

---

---

**NATURAL RESOURCE SUPPLEMENTAL CONDITIONS -*Natural Resource Zone Only***

1. Landscaping and development be compatible with existing development. \_\_\_\_\_

---

---

2. Proposed uses be planned and oriented to respect natural features, solar access, scenic vistas and natural drainage areas. \_\_\_\_\_

---

---

3. Access ways and provisions for motor vehicles be planned to minimize their impact. \_\_\_\_\_

---

---

Plot Plan to Accompany Application. This application must be accompanied by a plot plan which is drawn to scale and is of sufficient detail to support the statements made in this application, and to illustrate compliance with the special conditions required in the ordinance. At a minimum, the plot plan must show the location and dimension of existing and proposed building footprints, setback distances to the property lines and road right of way; the location of well and septic systems; significant physical or topographic limitations to development of the lot; and parking and loading areas as applicable. Setback distances from roads must be based on the distance from the edge of the right of way, not the pavement edge. If you are uncertain of the road right of way location, contact the Town Road Agent for more information.

By signing this application I/we understand that the information provided herein is accurate and is in accordance with the Canterbury Zoning Ordinance and other land use regulations of the Town and other applicable state and federal regulations which may apply.

If the applicant is not the same as the owner, a letter of authorization must be submitted along with the application.

I/we consent to allow the Canterbury Zoning Board of Adjustment or its designee to make onsite inspection(s) of my/our property as deemed necessary for the evaluation of my/our application.

\_\_\_\_\_  
Owner/Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Owner/Applicant Signature

\_\_\_\_\_  
Date

**TOWN OF CANTERBURY, NH**

**ABUTTERS FORM**

**Instructions:** Please indicate the name and mailing address of all abutters to the property which shall be reviewed by the Zoning Board. "Abutter" means any person whose property is located in New Hampshire and adjoins or is directly across the street or stream from the land under consideration by the local land use board. For purposes of receiving testimony only, and not for purposes of notification, the term "abutter" shall include any person who is able to demonstrate that his land will be directly affected by the proposal under consideration. For purposes of receipt of notification by a municipality of a local land use board hearing, in the case of an abutting property being under a condominium or other collective form of ownership, the term abutter means the officers of the collective or association, as defined in RSA 356-B:3, XXIII. Please also include the names of all Attorneys, Engineers, Surveyors, Planners, or Architects whose stamp appears on the plat to be submitted to the Board for review and the owner of the property on the plat. **PLEASE MAKE ADDITIONAL COPIES OF THIS FORM AS NECESSARY.**

Name: \_\_\_\_\_  
Map / Lot: \_\_\_\_\_  
Street: \_\_\_\_\_  
City: \_\_\_\_\_  
State/Zip: \_\_\_\_\_

Name: \_\_\_\_\_  
Map / Lot: \_\_\_\_\_  
Street: \_\_\_\_\_  
City: \_\_\_\_\_  
State/Zip: \_\_\_\_\_

Name: \_\_\_\_\_  
Map / Lot: \_\_\_\_\_  
Street: \_\_\_\_\_  
City: \_\_\_\_\_  
State/Zip: \_\_\_\_\_

Name: \_\_\_\_\_  
Map / Lot: \_\_\_\_\_  
Street: \_\_\_\_\_  
City: \_\_\_\_\_  
State/Zip: \_\_\_\_\_

Name: \_\_\_\_\_  
Map / Lot: \_\_\_\_\_  
Street: \_\_\_\_\_  
City: \_\_\_\_\_  
State/Zip: \_\_\_\_\_

Name: \_\_\_\_\_  
Map / Lot: \_\_\_\_\_  
Street: \_\_\_\_\_  
City: \_\_\_\_\_  
State/Zip: \_\_\_\_\_

Name: \_\_\_\_\_  
Map / Lot: \_\_\_\_\_  
Street: \_\_\_\_\_  
City: \_\_\_\_\_  
State/Zip: \_\_\_\_\_

Name: \_\_\_\_\_  
Map / Lot: \_\_\_\_\_  
Street: \_\_\_\_\_  
City: \_\_\_\_\_  
State/Zip: \_\_\_\_\_

Name: \_\_\_\_\_  
Map / Lot: \_\_\_\_\_  
Street: \_\_\_\_\_  
City: \_\_\_\_\_  
State/Zip: \_\_\_\_\_

Name: \_\_\_\_\_  
Map / Lot: \_\_\_\_\_  
Street: \_\_\_\_\_  
City: \_\_\_\_\_  
State/Zip: \_\_\_\_\_